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MAY 10 2005

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23513 7590 02/16/2005

GUNNISON MCKAY & HODGSON, LLP
GARDEN WEST OFFICE PLAZA, SUITE 220
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05/11/2005 SFELEKE2 00000060 10771072

01 FC:1501

1400.00 OP

David Albert Zoba

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Serge J. Hodgson

(Depositor's name)

Serge J. Hodgson

(Signature)

May 5, 2005

(Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/771,072 | 02/02/2004 | Pat Robert Hoffman | G007801 | 1979 |

TITLE OF INVENTION: STRUCTURES FOR IMPROVING HEAT DISSIPATION IN STACKED SEMICONDUCTOR PACKAGES

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|-----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1400 | \$0 | \$1400 | 05/16/2005 |
| EXAMINER | ART UNIT | | CLASS-SUBCLASS | | |
| CLARK, SHEILA V | 2815 | | 257-707000 | | |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Gunnison, McKay & Hodgson, L.L.P.

2 Serge J. Hodgson

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Amkor Technology, Inc.

Chandler, AZ 85248-1604

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

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The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0553 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Date *May 5, 2005*

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